

March 8 2020

(2261532)
Jo Ann Wilbert
Lane Murray (FIC8)
1916 N Hwy 36 Bypass
Gatesville, Texas 76596

To: Linnette Linthicum
2 Financial Plaza Suite 625
Huntsville, TX 77340

MS Aus Medical Supervisor
Lane Murray Unit

TDCJ Health Service Div
Office of Professional Standards
Patient Liaison Program
P.O. Box 99
Huntsville, TX 77342

Ladies please I am on this SHU project and it is
A complex and total farce. Living in Dorm F is over
crowded, under staffed and nothing but a maze! The food is
horrible, we are denied law library, daily exercise, and the
medical care is horrific. That is why I am writing this
letter. After being forcefully moved from Carol Young
Unit and being returned to Lane Murray Unit (Jan 19²⁰²¹)
the following conditions persist and have not been
remedied. I NEED TO SEE DR HODGES
OR A DOCTOR TO REMEDY SOME OF MY CARE
AND TREATMENT PROBLEMS. (DENIAL OF THESE
MEDICAL PROBLEMS WILL NOT MAKE ME GO AWAY)
1. I AM 100% Disabled. my medically unreasoned status should
read "continuous" instead it expires 3/30/21.
2. Been Given Gabapentin prescription 10 times - every time
the Unit cancels it. It is for nerve pain.

MAR 12 2021

- Been waiting over 9 months to see Pain Mgmt. (Gallston prescribed)
3. (Need) Tylenol 3 for severe chronic pain (left wrist, back (SURGICAL Pain on Left Hand) (Pain level 8)
 4. Medically-need to be transferred back to Cank Young (and be within 15 to 20 minutes of the hospital)
Possible Aneurysm or blood clot
 5. Been denied Medication for Migraines! Cannot travel 72 hours to location with nausea, vomiting, diarrhea, dizziness. Request one day travel pass (8) weeks ago with NO response from medical.
 6. I have a Prescript. from doctors for Pata day 11 Refills (+ expires 2/1/2022) it does not show on current Pil Pass (RX# HC-0095677)
My Mobicort is same way (RX# HC-0095677) 11 refills expires 2/1/2022 but does not show on Pil Pass.
 7. Have need A cane, brace brace + medical shoes for ALMOST two years. Have received nothing.
 8. Need Pillow Pass and Zip Shirt Pass - after surgery were required these items. contacted medical on Unit 7 times + never received items.
 9. Denied Physical Therapy At Lone Murray - According to therapist here it is NOT Available.
 10. Heat Index score needs to be Adjusted
 11. Have had (4) irregular mammograms - need to find exactly what problem is? (vital to my health)
 12. I waited one full year to obtain copies of my medical ~~records~~ records which are fraudulently filled out, medically inaccurate, and incorrect in assessment

MAR 12 2021

- Been waiting over 9 months to see Pain Mgmt. (Gulabston prescribed)
3. (Need) Tylenol 3 for severe chronic pain (feet, ankles, back (SURGICAL Pain on Left Hand) (Pain level 8)
 4. Medically-need to be transferred back to Caret Young (and be within 15 to 20 minutes of the hospital)
Possible aneurysm or blood clot
 5. Been denied Medication for Migraines! Cannot travel 12 hours to Gulabston with nausea, vomiting, diarrhea, dizziness. Request one day travel pass (8) weeks ago with NO response from medical.
 6. I have A Prescript. from doctors for Pataday 11 Refills (it expires 2/9/2022) it does not show on current Pill Pass (RX# MC-0075677)
My Mobicort is same way (RX# MC-0075677) 11 refills expires 2/9/2022 but does not show on Pill Pass.
 7. Have need A cane, brace brace + medical shoes for ALMOST two years. Have received nothing.
 8. Need Pillow Pass and Zip Shirt Pass - after surgery were required these items, contacted medical on Unit 7 times + never received items.
 9. Denied Physical Therapy At Lane Murray - According to therapist here it is NOT Available.
 10. Heat Index score needs to be Adjusted
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 12. I waited one full year to obtain copies of my medical ~~records~~ records which are fraudulently filled out, medically inaccurate, and incorrect in assessment

MAR 12 2021

13. Most recently All the I60's I submit to Medical come back with COVID stickers saying non emergent medical - my medical needs are Continuous and non stop! Just because you fail to treatment doesn't mean my PAIN goes away.
14. I am presently a Surgical Patient with numerous more trips to Galveston pending - in the mean time Unit medical is to see me every two weeks. I have been on Lane Murray 8 weeks now with NO follow up surgical care!
15. I have been waiting to see Dr Hodges now for 7 weeks. Warden Kempp even helped schedule an Appointment! I have yet to see a doctor!

J Ann Wilbert

To Ann Wilbert (2261580)
Carole Young Med FAC
5509 Attwater Ave
Dickinson, TX 77539

Clerk of the Court
Southern District of Texas
U.S. Court House
515 Rusk Street
Houston, TX 77002

~~U.S. District Court~~
~~Southern District of Texas~~
FILED

JAN 04 2021

David J. Bradley, Clerk of Court

Dear Clerk,

I Am writing this letter because I need to file A
42 U.S.C. § 1983 class action lawsuit against Carole Young
Medical Facility. They have Violated All of my Civil Rights by
denying me medical care and treatment. I Am A 100%
Disabled American Veteran and they are Systematically Killing Me.

I Am my own Attorney (Pro Se) and I need you to
please send me all the Forms required to file this suit.

I Appreciate Your kind consideration to this most
important matter. Thank You. God Bless You!

To Ann Wilbert (2261580)
To Ann Wilbert
Carole Young Med FAC (A12)
5509 Attwater Avenue
Dickinson TX 77539

2261580
Jo Ann Wilbert
Lane Murray Unit (FIC)
1916 N. Hwy 36 By Pass
Gatesville, Texas 76596

Access to Courts
1060 Hwy 190 East
Huntsville, Texas 77340

Dear Sir

The reason I Am writing to you is because of the Denial of my Right to use the LAW Library at this Unit. I have major court cases pending in WACO, and Houston and I have been denied the opportunity to use the LAW Library to do research. I Am not allowed OUT.

* The Special Project (S.H.U.) (sheltered housing unit) says they will bring me the materials I need; this is not only NOT TRUE > they have refused to bring the materials (8) times now; but when I need to DO Research on Cases they do not bring the material but also deny me ENOUGH time to utilize the materials! (They do not Respond to I60's.)

* The Law Library Also refuses to give me the Box required to store my legal Material. I have a large Amount of materials due to the Extent of my Case. My Court Records Alone were 735 pages. When my Attorney sent me the records, they TORE them all

MAR 18 2021

apart. Separated all the pages and they are all loose!
In addition to the records I have notebooks full of
Notes, am trying to Write A Writ of Habeas Corpus
and have allot of Correspondence from State Officials.

Law Library here informed me - ^{legitimate} ~~it~~ must all fit in
my Commissary box or they will confiscate it!

I was given two yellow chain bags to store all my
legal Material - BUT LAW LIBRARY insist it is
improperly stored being kept like it is! (Which is the
only way I can STORE IT BASED ON VOLUME.

I have written to the Warden, Law Library and have
had my LEGAL Material confiscated by Guard Mc Minn
(illegally). It was in the Yellow Chain Bags - but did
not fit in my Commissary Box! My Commissary Box is
just that - But because of Not getting A Storage
Box from Law Library I have NO way to keep my
legal Material but in Yellow Chain Bags on the Floor!

I was then told I have to Send All my legal
material Home At my Own Expense - this is
Impossible Also. My COURT cases are done at the
discretion of the Court and I cannot tell when I will
need to reference or research off A point of LAW.

Also based on Volume I have to send some
materials to the Criminal Court of Appeals! I cannot
afford to send anything home until done with the
Court.

I need your assistance to rectify some serious

MAR 18 2021

3
breaches of my legal Rights.

1st I need A Box to contain a large Amount of Legal Material!

2nd I need A Note or slip from your office stating I Am ALLOWED TO KEEP IN MY CELL LEGAL MATERIAL UNTIL MY COURT CASES ARE OVER WITH.

3rd: MY LEGAL MATERIALS WILL NOT BE CONFISCATED WHILE COURT CASES ARE PENDING.

4TH According to T.D.C.J rules I Am Allowed to take ① yellow Chain Bag and ① Red Chain Bag when I Am Unit Transferred! This has been denied me the last ② transferred.

Thank you for your time + consideration

John Wilbert

MAR 18 2023

Ombudsman

Obtaining my Property from Lane Murray: On March 15 2021 I left Lane Murray Unit. I was re-assigned to Carole Young Unit. The last time I did the same transfer it took my Property (75) days to get to Carole Young. The men on Carole Young get their Property every Thursday (women should have the same treatment)

When I requested the Property Officer (MS Bishop) to please follow up and find my Property she never responded. I need you to please Give me the Phone Number to the Property Warehouse and ensure I will be getting my Property on Carole Young in 21 days like the manual says.

Name: Jo Ann Wilbert No: 2261580 Unit: CYMF
 Living Quarters: B68 Work Assignment: ØØ

DISPOSITION: (Inmate will not write in this space)

TEXAS DEPARTMENT OF CRIMINAL JUSTICE — INSTITUTIONAL DIVISION

INMATE REQUEST TO OFFICIAL

REASON FOR REQUEST: (Please check one)

PLEASE ABIDE BY THE FOLLOWING CHANNELS OF COMMUNICATION. THIS WILL SAVE TIME, GET YOUR REQUEST TO THE PROPER PERSON, AND GET AN ANSWER TO YOU MORE QUICKLY.

1. ☐ Unit Assignment, Transfer (Chairman of Classification, Administration Building)
2. ☐ Restoration of Lost overtime (Unit Warden-if approved, it will be forwarded to the State Disciplinary Committee)
3. ☐ Request for Promotion in Class or to Trusty Class (Unit Warden- if approved, will be forwarded to the Director of Classification)
4. ☐ Clemency-Pardon, parole, early out-mandatory supervision (Board of Pardons and Paroles, 8610 Shoal Creek Blvd. Austin, Texas 78757)
5. ☐ Visiting List (Asst. Director of classification, Administrative Building)
6. ☐ Parole requirements and related information (Unit Parole Counselor)
7. ☐ Inmate Prison Record (Request for copy of record, information on parole eligibility, discharge date, detainees-Unit Administration)
8. ☐ Personal Interview with a representative of an outside agency (Treatment Division, Administration Building)

TO: Ombudsman DATE: 4/11/21

(Name and title of official)

ADDRESS: Huntsville TX

April 11

2261580
Jo Ann Wilbert
Carole Young Med Fac (B68)
5509 Attwater Ave
Dickinson TX 77539

Ombudsman
PO Box 99
Huntsville, Texas 77342

On March 15 2021 I left Lane Murray Unit on A Unit Transfer to Carole Young Medical Facility. My Property was shipped on March 16 2021. When I made the same move before from Lane Murray to Carole Young it took my Property 75 days to reach me! This violates T.D.C.J Policy of 21 days to get offender property. When I filed A Grievance on Carole Young for the Non Delivery of my Property. The Grievance Officer (MS McCoy) held my Grievance until my Property came in - then threw the Grievance in my face and said I hope you are Satisfied. (This was totally INAPPROPRIATELY handled.)

The Same scenario is repeating itself AGAIN! When I asked the Property Officer (MS Bishop) to follow up on where my Property is - she has not given me A response. Men on this Unit receive Property every Thursday! It is imperative I receive my Property due to Court legal Documents, Court deadlines, and Medical Records ^{contained} ~~contained~~ in my inmate property. Can you please call the Property Warehouse and make sure my Property will be delivered soon? My family will be calling you soon, As they have had to do numerous times.

The same thing is happening with my mail. I have written the mailroom supervisor at Lane Murray twice now. Also I have contacted the Warden at Lane Murray to forward my mail — my mail is still at Lane Murray. AND NOT being delivered to me.

Also my inmate trust fund statement for MARCH is missing and I have not received it! I have written them with NO response!

The communication between inter Agencies is appalling and I need these issues resolved!

Thank You

J Ann Wilbert 2261580 C4MF B68 4/11/21

MAY 4 2021

MAY 1 2021

Jo Ann Wilbert 2261580
Carol Young Med FAC
5509 Attwater Ave
Dickinson Tx 77539

Ombudsman
PO Box 99
Huntsville Tx 77539

MAY 1 2021

SIR,

I have been attempting to get my Property delivered to Carol Young Unit for 50 days now. The manual says inmate property should be delivered 21 days from date of Unit Transfer (Pg 20 Para 10) (I transferred MARCH 15 2021)

MAJOR Scott, the Grievance Officer (Evans) And Property Officer All ignore me! And won't call Huntsville Warehouse

The last time I was sent to this Unit - it TOOK (75) days to get my Property which is ridiculous.

Men receive property every Thursday and 3 black women in Down B (#53 JT, #55 Bev, #61 Linda (ALL) received their property in 3 weeks)

I need my Property - it has All my legal Materials - I DO NOT want to have to file An IG Complaint + investigation but I will also file Civil Rights claim if I don't receive Property Soon.

Jo Ann Wilbert

MAY 4 2021

MAY 07 2021

Jo Ann Wilbert (226 1580)
Carol Young Med Fac (B68)
5509 Attwater Ave
Dickinson Tx 77539

Ombudsman

ATTN: Shannon Kersh

Po Box 99

Huntsville Tx 27342-0099

Hello,

I am trying to rectify a situation as best I can with T.D.C.I and through U.T.M.B.! (It is extremely difficult)
1) ONE DAY travel pass was prescribed to me by Dr James Hodges on MARCH 11 2021 while at Lane Murray Unit. The reason I needed this PASS is due to a Medical Condition!

I was transferred to Carol Young because of Numerous Disabilities + Chronic Conditions!

Upon arriving on CAROLE Young - the Physician Assistant Cancelled my Pass - immediately wants to put me on the Bus, avoids ALL of the doctors Prescriptions for medications, and insists I am only temporarily on this Unit.

2) The One Day transport pass - means I ride the VAN to hospital appointments. I am picked up by VAN and delivered back to my Unit the SAME DAY.

2) (continued) After having made 116 trips by BUS from Lane Murray to Goree then on to Galveston Hospital it is impossible to ride the BUS any longer (it takes 3 to 4 days) to go on my medical appointments. (My Body does not Travel Well) ^{I Am 100%} ~~DISABLED~~
I Am 68 years old - I have a Crushed left Hand, A very bad back, feet + ankle problems and severe migraines (with nausea, vomiting, diarrhea, dizziness + confusion). (Very limited walking)
The one day travel pass - makes sure I travel only one day and SHOULD BE KEPT on CAROLE YOUNG.
This Pass should be Permanent in my file.

3) When I wrote to Classification + Records to make sure Carole Young is now my Home Unit instead of Lane Murray Unit (I received no response back) I wrote MR Burns the Unit Classification Officer with NO Response!
I DO NOT NEED TO BE FORCEABLY
Removed from this Unit like I have been 3
times before!

4) There are people who have been on Carole Young Unit for 30 years, 17 years, 10 years etc. I should be allowed to be permanantly assigned here due to permanent medical conditions, need for medical care + treatment within (15) minutes at a hospital, and ONE DAY Travel Pass.

5) Lane Murray Unit does not offer a ONE Day Travel Pass!

I only received inadequate medical care at Lane Murray and I have had to file OPI against that Unit.

I would appreciate it if you would look into my situation, contact State Records + Classification on my Behalf AND Get me Permanently Assigned to Carole Young Unit.

Thank You,
J Ann Wilbert



TEXAS DEPARTMENT OF CRIMINAL JUSTICE - INSTITUTIONAL DIVISION

INMATE REQUEST IS OFFICIAL

REASON FOR REQUEST: (Please check one)

PLEASE ABIDE BY THE FOLLOWING CHANNELS OF COMMUNICATION. THIS WILL SAVE TIME, GET YOUR REQUEST TO THE PROPER PERSON, AND GET AN ANSWER TO YOU MORE QUICKLY.

1. ☐ Unit Assignment, Transfer (Chairman of Classification, Administration Building)
2. ☐ Restoration of Lost overtime (Unit Warden-if approved, it will be forwarded to the State Disciplinary Committee)
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4. ☒ Clemency-Pardon, parole, early out-mandatory supervision (Board of Pardons and Paroles, 8610 Shoal Creek Blvd. Austin, Texas 78757)

5. ☐ Visiting List (Asst. Director of classification, Administration Building)
6. ☐ Parole requirements and related information (Unit Parole Counselor)
7. ☐ Inmate Prison Record (Request for copy of record, information on parole eligibility, discharge date, detainees-Unit Administration)
8. ☐ Personal Interview with a representative of an outside agency (Treatment Division, Administration Building)

TO: Board of Pardons + Paroles
(Name and title of official)

ADDRESS: 8610 Shoal Creek Blvd
Austin Texas 78757

DATE:

5/8/22

Please send me an Emergency Medical Reprieve Packet

Thank You

To Ann Wilkett
AZ/28

261580

Unit: Mt View

vvo

Assignment: 00

N: (Inmate will not write in this space)

request from Clemency Section at the address
in the back of this IEO.

Off. JAMES
5/16/2022

MAY 10 2021

To Ann Wilbert (2261580)
Carol Youngs Med Fac (B68)
5509 Attwater Ave
Dickinson Tx 77539

Access to Courts
ATTN: Frank Hoke
1060 Hwy 190 E
Huntsville, Tx 77340

Mr Hoke,

I Am at Carol Youngs Med Ctr and need the BOX to store my legal Material. My Court Case was extensive and my Court Case Alone comprised 750 pages. Carol Youngs tore Apart all my "LEGAL Files" and Now everything is single files of paper it is A Mess. I have only yellow chain bags (that Guards continuously want to go through and inspect when they know they SHOULD NOT.) I have a Problem TRYING to Store legal Files in my Inmate Lock Box.

Also when I left Lane Murray Unit (MARCH 15th 2021) I was Not allowed to Bring my legal Materials with ME) Consequently my legal Material Are All way over due coming to me here at Carol Youngs. I have written Major Scott and the Property Officer [3] times to tell them I NEED my LEGAL MATERIAL because I have DUE DATES to the COURT in Houston. They ignore my Request to find my Property and Get my legal materials to me. My legal Property was due to me April 8 2021!

MAY 13 2021

JUN 18 2021

The Law Library on this Unit refuses to make copies of any documents I need for Court and or my Writ of Habeas Corpus. I cannot be sending my only copy out to have COPIES made. Can you please contact MS Holmes and request we be allowed to make copies on this Unit?

STORAGE Problem: If and when my Property Ever ARRIVES I will not be Able to store FOOD, clothing and hygiene in my LOCK Box. My Court materials is to extensive. I should Not be forced to have my Court materials confiscated while I work my CASE (Appeal).

Would you please contact the Huntsville Property Officer and have them Expedite my Property (which includes 2 yellow chain bags full of Legal Material.) They are in violation of T.D.C.J Handbook page 20 paragraph 10 by not delivering my property in 21 days. Three black inmates # 53 (Joanna) # 55 Vey + # 61 (Linda) All received their property in 21 days.

Thank You,
JoAnn Wilbert

MAY 13 2021

JUN 18 2021

SUBJECT: State briefly the problem on which you desire assistance.

Find my Property

Please contact Property Whse in Huntsville And get my Property delivered. It is 35 days over due and I need my legal Material, my clothes And all my Food in my Chain BAGs.

Name: Jo Ann Wilbert

No: 2261580

Unit: Carole Young Med PAC

Living Quarters: B68

Work Assignment: cdp

DISPOSITION: (Inmate will not write in this space)

MAY 14 2021

TEXAS DEPARTMENT OF CRIMINAL JUSTICE — INSTITUTIONAL DIVISION

INMATE REQUEST TO OFFICIAL

REASON FOR REQUEST: (Please check one)

PLEASE ABIDE BY THE FOLLOWING CHANNELS OF COMMUNICATION. THIS WILL SAVE TIME, GET YOUR REQUEST TO THE PROPER PERSON, AND GET AN ANSWER TO YOU MORE QUICKLY.

- | | |
|---|---|
| 1. <input type="checkbox"/> Unit Assignment, Transfer (Chairman of Classification, Administration Building) | 5. <input type="checkbox"/> Visiting List (Asst. Director of Classification, Administration Building) |
| 2. <input type="checkbox"/> Restoration of Lost overtime (Unit Warden-if approved, it will be forwarded to the State Disciplinary Committee) | 6. <input type="checkbox"/> Parole requirements and related information (Unit Parole Counselor) |
| 3. <input type="checkbox"/> Request for Promotion in Class or to Trusty Class (Unit Warden- if approved, will be forwarded to the Director of Classification) | 7. <input type="checkbox"/> Inmate Prison Record (Request for copy of record, information on parole eligibility, discharge date, detainers-Unit Administration) |
| 4. <input type="checkbox"/> Clemency-Pardon, parole, early out-mandatory supervision (Board of Pardons and Paroles, 8610 Shoal Creek Blvd. Austin, Texas 78757) | 8. <input type="checkbox"/> Personal Interview with a representative of an outside agency (Treatment Division, Administration Building) |

TO:

Ombudsman

(Name and title of official)

DATE:

5/10/21

ADDRESS:

Cymf

SUBJECT: State briefly the problem on which you desire assistance.

What is STATUS?

I have Previously Processed (5) Medical Grievances in regard to medical malpractice Against MS Humphreys. I have received none back.

NP Humphreys IS NOT MY MEDICAL PROVIDER

Humphreys has been fired by me - And I Am Gonna Go through the Court to Enforce this (She has done nothing but Cause me Grief. She is Also interfering with my Mail sent to Medical.

You are receiving COPIES because the COURT will Get originals.

⊗ Also Mr Koontz in Huntsville is doing nothing to correct Errors - so I Am Going to start going to the Governors Office

Name: Jo Ann Wilbert

No: 2261580

Unit: Mt View

Living Quarters: AZ/28

Work Assignment: ØØ

DISPOSITION: (Inmate will not write in this space)

INMATE REQUEST TO OFFICIAL

REASON FOR REQUEST: (Please check one)

PLEASE ABIDE BY THE FOLLOWING CHANNELS OF COMMUNICATION. THIS WILL SAVE TIME, GET YOUR REQUEST TO THE PROPER PERSON, AND GET AN ANSWER TO YOU MORE QUICKLY.

- | | |
|--|---|
| <p>1. <input type="checkbox"/> Unit Assignment, Transfer (Chairman of Classification, Administration Building)</p> <p>2. <input type="checkbox"/> Restoration of Lost overtime (Unit Warden-if approved, it will be forwarded to the State Disciplinary Committee)</p> <p>3. <input type="checkbox"/> Request for Promotion in Class or to Trusty Class (Unit Warden- if approved, will be forwarded to the Director of Classification)</p> <p>4. <input type="checkbox"/> Clemency-Pardon, parole, early out-mandatory supervision (Board of Pardons and Paroles, 8610 Shoal Creek Blvd. Austin, Texas 78757)</p> | <p>5. <input type="checkbox"/> Visiting List (Asst. Director of classification, Administration Building)</p> <p>6. <input type="checkbox"/> Parole requirements and related information (Unit Parole Counselor)</p> <p>7. <input type="checkbox"/> Inmate Prison Record (Request for copy of record, information on parole eligibility, discharge date, detainees-Unit Administration)</p> <p>8. <input type="checkbox"/> Personal Interview with a representative of an outside agency (Treatment Division, Administration Building)</p> |
|--|---|

TO: Grievance Officer
(Name and title of official)

DATE: 5/10/22

ADDRESS: Mt View

TEXAS DEPARTMENT OF CRIMINAL JUSTICE

HEALTH SERVICES DIVISION

SICK CALL REQUEST

PART A: (To be completed by offender)

Date:

5/11/22

Offender's Name:

Jo Ann Wilbert

TDCJ No.:

2261580

Work Assignment:

00 (Medically Unassigned)

rk Hours:

00

Wing No:

A2/28

School Hours:

old

Service needed:



Medical



Dental



Mental Health



Other:

Reason for Health Services Appointment:

Answer this Question - How do you do A chart review And Not have the inmate in the room?

How long have you had this problem?

Hours:

Days:

Since Humphreys has looked At my chart Dec 10 2021

"In accordance with state law, if this visit meets offender annual health care services fee criteria, I understand that my trust fund account may be charged a \$13.55 health care services fee. I also understand that I will be provided access to health care services regardless of my ability to pay this fee."

Signature of Offender

Jo Ann Wilbert

Person+ chronic Conditions

MAY 12 AM 1:38 1/4

Part B: (To be completed by medical personnel - Do not write below this line)

Medical Reply:

The provider reviews / looks at your medical record. That is a chart review

F. Jones, RN

Medical Staff Member's Signature

Date

Medical

DEPARTAMENTO DE JUSTICIA CRIMINAL DE TEXAS

DIVISION DE SERVICIOS MEDICOS

PETICION PARA TRATAMIENTO MEDICO

PARTE A: (Completado por ofensor)

Fecha: _____

Nombre de ofensor: _____

Numero de TDCJ.: _____

Trabajo: _____

Horas de trabajo: _____

Ala del edificio: _____ Horas de escuela: _____

Servicios necesarios: ☐ Medico ☐ Dental ☐ Salud Mental ☐ Otro: _____

Razon para tratamiento de servicio de salud: _____

Cuanto tiempo tiene con este problema? Horas: _____ Dias: _____

"De acuerdo con la ley estatal, si esta visita encuentra al delincuente criterios de honorarios de servicios de asistencia médica anuales, entiendo que mi cuenta de fondo fiduciario puede ser cobrada unos honorarios de 13 dólares y 55 centavos. También entiendo que me proporcionarán acceso a servicios de asistencia médica sin tener en cuenta mi capacidad de pagar estos honorarios."

Firma del Ofensor

Parte B: (Completado por personal medico – No escriba debajo de esta linea.)

Respuesta Medica: _____

Firma del Miembro de Empleados Medicos

Fecha

TEXAS DEPARTMENT OF CRIMINAL JUSTICE INSTITUTIONAL DIVISION

INMATE REQUEST TO OFFICIAL

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| 4. <input type="checkbox"/> Clemency-Pardon, parole, early out-mandatory supervision (Board of Pardons and Paroles, 8610 Shoal Creek Blvd. Austin, Texas 78757) | 8. <input type="checkbox"/> Personal Interview with a representative of an outside agency (Treatment Division, Administration Building) |

TO: Ms Pilkington (Medical Records)
(Name and title of official)

DATE: 5/13/22

ADDRESS: Mt View

I Am still Missing my BIG STACK of Medical Records that was in your office (I Already paid for them but have Not received them. When can I pick them up?

Hospital Records Only!

Name: Jo Ann Wilbert

No: 2261580

Unit: Mt View

Living Quarters: A2/28

Work Assignment: ☐☐

DISPOSITION: (Inmate will not write in this space)

Medically Unassigned

Medical Record

P. Jones, RN P//

I will issue records to you as soon as approval for Health Service Archives has been received. Ms. Pilkington

Jo Ann Wilbert (2261580)
Carole Young Medical FAc (B68)
5509 Attwater Ave
Dickinson TX 77539

Ombudsman
ATTN: Shannon Kersch
Po Box 99
Huntsville, Texas 77342-0099

Hello -

I Am AGAIN having to write you because of what Carole Young Unit is doing! They are NOT checking on why I have Not received my Property. I checked with MAJOR Scott + Property (Ms Bishop)

I was Unit Transferred from Lane Murray Unit on MARCH 15 2021. MS Melton (the Property Officer) shipped my Property to Huntsville on MARCH 16 2021. According to TDCJ rules my Property should be delivered to me in 21 days. This is 55 days now with NO Property!

This is the Second time being Assigned to this Unit - The first time I waited 75 days for my Property and the Day it Arrived I was forced off the Unit (because I filed A Grievance.) over NON Receipt!

This time I filed A Grievance with the Grievance Officer (MS Evans). EVANS only response to me was I Don't give A FLICK.

MAY 14 2021

JUN 18 2021

This very unprofessional attitude carried over into my Second Grievance - When I told her my Property had not arrived and Black inmates # 53 (Joanna) # 55 (Vey) and # 61 (Linda) All received their property in 21 days or less.

I then went to MAJOR Scott and CY Property Officer (MS Bishop) to Run A check on where my Property is. The Major told Bishop to call Huntsville. ← This never happened.

I feel All people involved (MS Bishop, Major Scott, and Evans are extremely prejudice toward me) And refuse to "Assist" with getting my Property Found and delivered to ME.

I Am Also sure - once my Property is delivered they will AGAIN try to Force me off this Unit. This should NOT happen either because I have A Medical Need to be here.

OpAnn Wilbent

MAY 14 2021

JUN 18 2021

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Inter-Office Communication
Administrative Review and Risk Management
Offender Grievance

TO: WILBERT, JO ANN**DATE: 5/18/2021****TDCJ #: 02261580****UNIT: GC****FROM: Central Grievance Office****SUBJECT: Offender Correspondence**

Your documents received in this office have been reviewed and a response is indicated below. Contact the warden, major, chief of classification or a security officer for issues you deem as an emergency; however, are not considered an emergency, through the Offender Grievance Procedure. **If you need additional information or assistance, you may contact the Unit Grievance Investigator at your unit.**

- ☐ Your correspondence was received at the Central Grievance Office and forwarded to Unit Administration for further review.
- ☒ Your correspondence was forwarded to the ARRM Division and this division (Access to Courts, Counsel Substitute, Ombudsman, & Offender Grievance) does not respond to offender correspondence.
- ☒ Please utilize the Offender Grievance Procedure to address your concerns.
- ☐ A copy of the Instructions on How to Write and Submit Grievances is enclosed for your information.
- ☐ Your Step 1 grievance(s) was properly screened.
- ☐ Direct this issue to the Classification and Records Office.
- ☐ Direct this issue to the Parole Board.
- ☐ It is not permissible to mail your grievances directly to the Central Grievance Office. Submitting your grievances incorrectly may result in your grievable time to expire.
- ☐ This issue is currently being addressed by unit officials. Grievance # _____ is under review at Step ____.
- ☐ These issues have been reviewed at both steps of the grievance procedure. No other administrative remedies are available to you regarding the issue. Further action by this office is not warranted.
- ☐ Records indicate that Grievance # _____ was returned to you on _____.
- ☐ Attachments returned.

Don't be retarded : The Grievance Officer is the Problem she (Evans) opens our mail and Grievances and throws away the things she doesn't like. Step 2's never get to you!

JUN 18 2021

B68

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Inter-Office Communication
Administrative Review and Risk Management
Offender Grievance

TO: WILBERT, JO ANN

DATE: 05/19/21

TDCJ #: 2261580

UNIT: GC

FROM: Central Grievance Office

SUBJECT: Offender Correspondence

Your documents received in this office have been reviewed and a response is indicated below. Contact the warden, major, chief of classification or a security officer for issues you deem as an emergency; however, are not considered an emergency, through the Offender Grievance Procedure. **If you need additional information or assistance, you may contact the Unit Grievance Investigator at your unit.**

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- ☒ Your correspondence was forwarded to the ARRM Division and this division (Access to Courts, Counsel Substitute, Ombudsman, & Offender Grievance) does not respond to offender correspondence.
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- ☐ This issue is currently being addressed by unit officials. Grievance # _____ is under review at Step _____.
- ☐ These issues have been reviewed at both steps of the grievance procedure. No other administrative remedies are available to you regarding the issue. Further action by this office is not warranted.
- ☐ Records indicate that Grievance # _____ was returned to you on _____.
- ☐ Attachments returned.

The Property Officer (MS Bishop) called Lane Murray and instead of processing my Property - she told them to Hold it - because I would be coming back to Lane Murray. That was A complete LIE (I never wanted to go back to Lane Murray that is why I Unit Transferred off that Unit,) it was ugly.

JUN 18 2021

June 09, 2021

Jo Ann Wilbert
TDCJ# 02261580
Carol Young Medical Facility B Dorm-#68
5509 Attwater Avenue
Dickinson, Texas 77539

Judge David Hittner
United States District Court
Southern District Court
P.O. Box 61010
Houston, Texas 77208

Reference Case # 4-21-CV-01561 "Incident Report"
Abuse of Elderly Disabled Inmate (continues!)

On Friday, June 4, 2021 at 0600, the guard Bell called me and said I was on chain to go to the Hospital in Galveston. When I went to Medical to process, SGT. Sheffield was supervising the loading of the inmates. I informed him I have doctors orders (from Dr. James Hodges, dated 3/11/2021) that I travel by Van only. (This is due to a medical condition!)

Sheffield wanted my "medical pass" and I showed it to him. Standing right next to Sheffield was a Large Black Guard who refused to give me her name. Sheffield said, "you either get on the bus or you need to Refuse Medical." I told him, I was going to Grieve this incident. PA Proctor deliberately cancelled my ONE DAY TRAVEL PASS--which violated doctors orders. This is (3) times now she has deliberately sabotaged my medical care and treatment.

When I showed Sheffield my Pass he did not show it to the Black Guard standing next to him that would cuff me! When I had to get ready to leave--she started loudly sussing me out and telling me to show her my Pass which I did! She continued to tell me in a very belligerent way and I quote "Hurry up and get the FUCK on the Bus." Sheffield stood right there and let this Black Guard swear at me and be abusive and threaten me!

When I went out to get on the Bus (Bus#015566)--the van I was supposed to be on was right there too! I have sent the PASS signed by Dr. Hodges to this court! The ONE DAY TRAVEL PASS is specifically for this CYMF Unit and is FULLY REQUIRED because of the messed up Transportation on the Bus, and my MEDICAL REASON. As typical the Toilet on the Bus was completely full of human waste, toilet paper and the stench was unbearable--the toilet did not flush and there was urine all over the floor, we had to walk through! It was disgusting! Besides this, the bus had not been cleaned and was full of ALL KINDS OF WASTE/TRASH/GARBAGE. Using the toilet on the Bus is done in Full View of MALE GUARDS and all the People on the Bus.

JUN 18 2021

It is Humiliating and Appalling, degrading and abusive for me to have to ride the Bus, under this conditions!

**PART III
DISCRIMINATION AGAINST WOMEN**

Upon arriving at the Hospital in Galveston--the Bus of women are made to wait behind all the arriving vehicles of men and all the Vans, On four separate occasions I have waited 2½, 3, 1½ and 2 hours just to get into the Hospital. The entire time just sitting there watching everyone getting in. I have even missed appointments due to Bus Delays and not getting into the hospital quickly.

I have a specific medical reason to ride, the wan--when I am sick, I have nausea, vomiting, diarrhea, dizziness and I have to have access to a toilet. The van gets me into the hospital quickly so it accommodates my medical condition. Vans do not wait outside the hospital. It does not matter that Van does not have a toilet--it gets me there fast, enough to use the toilet when I arrive and have a need to use a toilet at my disposal.

The ONE DAY TRAVEL PASS, I was issued was approved by Dr. James Hodges on 3/11/2021 and P.A. (Proctor) cannot override doctors orders (I am charging her with negligence and abuse of the elderly, failure to treat humanely, a violation of Texas Law!

I am charging SGT Sheffield with allowing PD22 code, 14a, 14b, 14c, use of Profanity/abusive/language/gestures; use of slur/hostile epithets and Texas Penal Code §39.04; PD 22 code 23, Mistreatment of Offenders; PD22 code, 7, Substandard Duty Performance and Standards of Conduct Violations. When guards cuss out inmates, mistreat them and abuse them and he does nothing to stop them.

PART III

Upon arriving at the Hospital in Galveston the Bus which was very crowded and had no Social Distancing was able to drive in, in about 20 minutes. All 23 women were immediately taken to the Strip Room. This room was absolutely filthy, the floor was caked with dust, debris, garbage, grease and grim. We were forced to walk bare foot and naked in this filthy Environment!, to get our clothes back.

Upon leaving the Strip Room--the three black guards yelled: "We don't give a Fuck if you miss your appointments, we don't give a Fuck if you are seen today or get rescheduled, just get the Fuck out of here and don't ask for anything, we're going home today it's Friday."

All day long we were locked in the day room, they never came to Help us, answer questions, and when medical issues arose we were completely ignored (men got everything). One lady sat in soiled diapers for over 6 hours with no one checking on her, two pregnant women who had severe pain were made to sit on a wooden bench for 12 hours with nothing for PAIN. We were treated like caged animals.

After 11:00 a.m., we were given NO FOOD! I was there from 0730 until 8:00 P.M. I was abandoned by Carol Young Medical Facility for

Pick-up and Transport back to the Unit. I was ready at 2:30P.M. to go back to the Unit. At 2:30 P.M. "A" Dorm (CYMF) was picked up by Van and 6 women from "B" Dorm (CYMF) were left behind.

At 4:00P.M., 5:00P.M., 6:00P.M. we were asking about our ride back. No one answered us about our ride. Finally at 8:00P.M.--3 people (myself, Anderson, and Jeannie) were picked up. The other 3 people were left behind for 3 more hours.

The ride back to the Unit was a Horrific Nightmare and this made the FOURTH time I have been abandoned at the Hospital for 12 hours waiting for a ride back to the Unit, which is 20 minutes away.

The Bus transportation discriminates against women, the facilities for women are filthy and disgusting (OSHA and the IG office should investigate) and after having filed two Grievances talking to Major Scott, Captain Davis and medical there is NO resolution but to file and continue this Law Suit.

Respectfully,

Jo Ann Wilbert

cc: Office of the Inspector General
Executive Director TDCJ, Brian Collier

JUN 18 2021

TEXAS DEPARTMENT OF CRIMINAL JUSTICE — INSTITUTIONAL DIVISION

INMATE REQUEST TO OFFICIAL

REASON FOR REQUEST: (Please check one)

PLEASE ABIDE BY THE FOLLOWING CHANNELS OF COMMUNICATION. THIS WILL SAVE TIME, GET YOUR REQUEST TO THE PROPER PERSON, AND GET AN ANSWER TO YOU MORE QUICKLY.

- ☐ Unit Assignment, Transfer (Chairman of Classification, Administration Building)
- ☐ Restoration of Lost overtime (Unit Warden-if approved, it will be forwarded to the State Disciplinary Committee)
- ☐ Request for Promotion in Class or to Trusty Class (Unit Warden- if approved, will be forwarded to the Director of Classification)
- ☐ Clemency-Pardon, parole, early out-mandatory supervision (Board of Pardons and Paroles, 8610 Shoal Creek Blvd. Austin, Texas 78757)
5. ☐ Visiting List (Asst. Director of classification, Administration Building)
6. ☐ Parole requirements and related information (Unit Parole Counselor)
7. ☐ Inmate Prison Record (Request for copy of record, information on parole eligibility, discharge date, detainers-Unit Administration)
8. ☐ Personal Interview with a representative of an outside agency (Treatment Division, Administration Building)

TO: Ombudsman
 (Name and title of official)

DATE:

June 10 2021

ADDRESS: Huntsville

SUBJECT: State briefly the problem on which you desire assistance.

You are doing

You are doing nothing to elaborate any of inmates problem with the staff on this Unit. What good does it do to even request your help.

The Grievance Officer is the Problem on this Unit and until you do something about getting rid of her - You will always be flooded with grievances and phone calls. Do I really need to start calling the IG?

Name:

J Ann Wilbert

No:

2261580

Unit:

CYMF

Living Quarters:

B68

Work Assignment:

ØØ

DISPOSITION: (Inmate will not write in this space)

JUN 18 2021

A2-28B

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Inter-Office Communication
Administrative Review and Risk Management
Offender Grievance

TO: WILBERT, JO ANN

DATE: 11/4/2021

TDCJ #: 02261580

UNIT: MV

FROM: Central Grievance Office

SUBJECT: Correspondence

Your documents received in this office have been reviewed and a response is indicated below. Contact the warden, major, chief of classification or a security officer for issues you deem as an emergency; however, are not considered an emergency, through the Offender Grievance Procedure. **If you need additional information or assistance, you may contact the Unit Grievance Investigator at your unit.**

- ☐ Your correspondence was received at the Central Grievance Office and has been forwarded to Unit Administration for further review.
- ☐ Your correspondence was forwarded to this office by the Ombudsman's Office. That office does not respond to offender complaints or requests.
- ☒ Please utilize the Offender Grievance Procedure to address your concerns.
- ☐ A copy of the Instructions on How to Write and Submit Grievances is enclosed for your information.
- ☐ Your Step 1 grievance(s) was properly screened.
- ☐ Direct this issue to the Classification and Records Office.
- ☐ Direct this issue to the Parole Board.
- ☐ It is not permissible to mail your grievances directly to the Central Grievance Office. Submitting your grievances incorrectly may result in your grievable time to expire.
- ☐ This issue is currently being addressed by unit officials. Grievance # is under review at Step-1.
- ☐ These issues have been reviewed at both steps of the grievance procedure. No other administrative remedies are available to you regarding the issue. Further action by this office is not warranted.
- ☒ Records indicate that Grievance #_ was returned to you on _.
- ☐ Attachments returned.

2021013815 filed on 10/2/20 returned 12/17/20
No other grievances past Oct 2020 have been filed on Law Library access.

To Show this Court how totally
messed up my medical records are.

1. Dr Chan in Galveston recommended
I have mammograms every six
months And An Ultra Sound.
Every time I did it.
2. When A mammogram done at Crane
Unit showed no problems since 2019
this is completely false
I have had irregular mammograms
2019, All of 2020 and 2021. My family
knows this
So who is lying???
3. My sister knows of these problems
because she I contacted her immediately
in 2019. When PA Bennett discovered problem.
4. Since this mammogram 11/16/21 my
right breast has been leaking yellow
discharge ~~plus~~ because they were so rough, within
they the EXAM.
5. I Am extremely concerned, because this is not

Patient Name : WILBERT, JO A
 Patient Id : 2261580
 Patient Phone :
 Date of Birth : 05/29/1953
 SS# : -- Sex : Female

Ordering
 Physician : SHIELDS, MARTY
 Facility : CRAIN (GV)
 1401 STATE SCHOOL RD
 GATESVILLE TX 76528

Test Name	Result	ABN Unit Flag	Reference Range	LAB ID
-----------	--------	------------------	--------------------	-----------

Accession: R1570954 Requisition: 220900266
 Imaged: 11/16/21 08:25 Reported: 11/18/21 15:33

Procedure: BI DIAGNOSTIC TOMOSYNTHESIS BILATERAL

NARRATIVE

Examination:
 BI DIAGNOSTIC TOMOSYNTHESIS BILATERAL

History:
 Patient is 68 year old and is seen for: Scr.

Computer-aided detection (CAD) utilized.

Comparisons: 10/28/2020 BI DIAGNOSTIC TOMOSYNTHESIS RIGHT, 03/31/2020 BI DIAGNOSTIC TOMOSYNTHESIS BILATERAL, and 06/20/2019 BI SCREENING MAMMOGRAM BILATERAL

Findings:
 The breasts have scattered areas of fibroglandular density. There is no evidence of suspicious masses, calcifications, or other abnormal findings.

Stable subcentimeter oval masses and focal asymmetries in the upper outer quadrant of the right breast, unchanged since 2019.

Impression:
 No mammographic evidence of malignancy.

Recommendation:
Annual mammographic follow-up - Bilateral

BI-RADS Category:

Both 2 - Benign

I, Flavia Posleman Monetto, MD personally reviewed the study and agree with the resident's/fellow's report.

Interpreted by: POSLEMAN MONETTO, FLAVIA, E. NPI: 1851952774

A2-278B

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Inter-Office Communication
Administrative Review and Risk Management
Offender Grievance

TO: WILBERT, JO ANN

DATE: 11/29/2021

TDCJ #: 02261580

UNIT: MV

FROM: Central Grievance Office

SUBJECT: Correspondence

Your documents received in this office have been reviewed and a response is indicated below. Contact the warden, major, chief of classification or a security officer for issues you deem as an emergency; however, are not considered an emergency, through the Offender Grievance Procedure. **If you need additional information or assistance, you may contact the Unit Grievance Investigator at your unit.**

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You had the option to file a Step 2 regarding your property but didn't. Your Step 1 indicates you received 3 boxes of property on 5/13/21. It can take 6 weeks or more for shipped property to arrive.

A2-28B

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Inter-Office Communication
Administrative Review and Risk Management
Offender Grievance

TO: WILBERT, JO ANN

DATE: 12/20/2021

TDCJ #: 02261580

UNIT: MV

FROM: Central Grievance Office

SUBJECT: Correspondence

Your documents received in this office have been reviewed and a response is indicated below. Contact the warden, major, chief of classification or a security officer for issues you deem as an emergency; however, are not considered an emergency, through the Offender Grievance Procedure. **If you need additional information or assistance, you may contact the Unit Grievance Investigator at your unit.**

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- ☐ Attachments returned.

12-288

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
Inter-Office Communication
Administrative Review and Risk Management
Offender Grievance

TO: WILBERT, JO ANN

DATE: 12/20/2021

TDCJ #: 02261580

UNIT: MV

FROM: Central Grievance Office

SUBJECT: Correspondence

Your documents received in this office have been reviewed and a response is indicated below. Contact the warden, major, chief of classification or a security officer for issues you deem as an emergency; however, are not considered an emergency, through the Offender Grievance Procedure. **If you need additional information or assistance, you may contact the Unit Grievance Investigator at your unit.**

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Texas Department of Criminal Justice

STEP 1 OFFENDER GRIEVANCE FORM

OFFICE USE ONLY

Grievance #: _____
 Date Received: _____
 Date Due: _____
 Grievance Code: _____
 Investigator ID #: _____
 Extension Date: _____
 Date Retd to Offender: _____

Offender Name: Jo Ann Wilbert TDCJ # 2261580
 Unit: Mt View Housing Assignment: A2/28
 Unit where incident occurred: Mt View

You must try to resolve your problem with a staff member before you submit a formal complaint. The only exception is when appealing the results of a disciplinary hearing.

Who did you talk to (name, title)? Mr Koontz (Med Ombudsman) Humphreys + Walders When? continuous
 What was their response? Failed to take any action.
 What action was taken? I work Division of Licensing and Court

State your grievance in the space provided. Please state who, what, when, where and the disciplinary case number if appropriate

NP Jennifer Humphreys is completely out of her mind and I
Am giving UTMB and TDCJ (NOTICE) that she is
NOT in any way my Medical Provider. (She is
grossly incompetent and has done me EGREGIOUS
MEDICAL HARM by deleting ALL MY MEDICAL
RESTRICTIONS.
In Addition to this action - She put me in
WORK STATUS (which I Am unable to do
Medically since 2008.
SHE has fraudulently Annotated my Medical Records
and continues to write my restrictions are appropriate
when they are NOT. (FRAUD)

I have severe Allergies and do not work around chemicals,
My left hand is crushed I DO NOT FOLD CLOTHES
I have arthritis in my knees + spine and DO NOT Climb
I have limited walking due to a bad back feet + Ankles
I cannot lift more than 15lbs.

Humphreys refused to renew my CUFF Pass and refused to
Put me in Medically Unassigned Status As my Neurologist
Dr Pires put me in on Feb 18 2022.

Action Requested to resolve your Complaint.

I will get A COURT ORDER to have
 this Person removed from my medical care She is A menace.

Offender Signature: Ann Wilbert

Date: 5/10/22

Grievance Response:

Signature Authority: _____

Date: _____

If you are dissatisfied with the Step 1 response, you may submit a Step 2 (I-128) to the Unit Grievance Investigator within 15 days from the date of the Step 1 response. State the reason for appeal on the Step 2 Form.

Returned because: *Resubmit this form when the corrections are made.

- ☐ 1. Grievable time period has expired.
- ☐ 2. Submission in excess of 1 every 7 days. *
- ☐ 3. Originals not submitted. *
- ☐ 4. Inappropriate/Excessive attachments. *
- ☐ 5. No documented attempt at informal resolution. *
- ☐ 6. No requested relief is stated. *
- ☐ 7. Malicious use of vulgar, indecent, or physically threatening language. *
- ☐ 8. The issue presented is not grievable.
- ☐ 9. Redundant, Refer to grievance # _____
- ☐ 10. Illegible/Incomprehensible. *
- ☐ 11. Inappropriate. *

UGI Printed Name/Signature: _____

Application of the screening criteria for this grievance is not expected to adversely affect the offender's health.

Medical Signature Authority: _____

I-127 Back (Revised 11-2010)

OFFICE USE ONLY

Initial Submission UGI Initials: _____

Grievance #: _____

Screening Criteria Used: _____

Date Recd from Offender: _____

Date Returned to Offender: _____

2nd Submission UGI Initials: _____

Grievance #: _____

Screening Criteria Used: _____

Date Recd from Offender: _____

Date Returned to Offender: _____

3rd Submission UGI Initials: _____

Grievance #: _____

Screening Criteria Used: _____

Date Recd from Offender: _____

Date Returned to Offender: _____

TEXAS DEPARTMENT OF CRIMINAL JUSTICE — INSTITUTIONAL DIVISION

INMATE REQUEST FOR OFFICIAL

REASON FOR REQUEST: (Please check one)

PLEASE ABIDE BY THE FOLLOWING CHANNELS OF COMMUNICATION. THIS WILL SAVE TIME, GET YOUR REQUEST TO THE PROPER PERSON, AND GET AN ANSWER TO YOU MORE QUICKLY.

- | | |
|---|---|
| 1. <input type="checkbox"/> Unit Assignment, Transfer (Chairman of Classification, Administration Building) | 5. <input type="checkbox"/> Visiting List (Asst. Director of classification, Administration Building) |
| 2. <input type="checkbox"/> Restoration of Lost overtime (Unit Warden-if approved, it will be forwarded to the State Disciplinary Committee) | 6. <input type="checkbox"/> Parole requirements and related information (Unit Parole Counselor) |
| 3. <input type="checkbox"/> Request for Promotion in Class or to Trusty Class (Unit Warden- if approved, will be forwarded to the Director of Classification) | 7. <input type="checkbox"/> Inmate Prison Record (Request for copy of record, information on parole eligibility, discharge date, detainees-Unit Administration) |
| 4. <input type="checkbox"/> Clemency-Pardon, parole, early out-mandatory supervision (Board of Pardons and Paroles, 8610 Shoal Creek Blvd. Austin, Texas 78757) | 8. <input type="checkbox"/> Personal Interview with a representative of an outside agency (Treatment Division, Administration Building) |

Grievance Officer / CPT Mankar ✓

TO: Medical Supervisor
(Name and title of official)

DATE:

4/4/22

ADDRESS:

Mt View

TYPICAL Medical Screen Ups-

On MARCH 30 2022 I went on Nurse Sick Call /for
A Second Opinion on medical care (And an Appt with PA Holmes.)

On April 4 2022 I was again called to have to go to
medical for the Same Sick Call. When I had SGT Schicksnyder call
medical they insisted I had to show up for the same thing!
This is totally idiotic And A waste of time!

I need an Appointment with PA Holmes only!

Name: Jo Ann Wilbert No: 2261580 Unit: Mt View
Living Quarters: A2/28 Work Assignment: ☐☐

DISPOSITION: (Inmate will not write in this space)

Medically Unassigned-I don't care what
you fraudulently wrote.

TEXAS DEPARTMENT OF CRIMINAL JUSTICE — INSTITUTIONAL DIVISION

INMATE REQUEST TO OFFICIAL

REASON FOR REQUEST: (Please check one)

PLEASE ABIDE BY THE FOLLOWING CHANNELS OF COMMUNICATION. THIS WILL SAVE TIME, GET YOUR REQUEST TO THE PROPER PERSON, AND GET AN ANSWER TO YOU MORE QUICKLY.

- | | |
|---|---|
| 1. <input type="checkbox"/> Unit Assignment, Transfer (Chairman of Classification, Administration Building) | 5. <input type="checkbox"/> Visiting List (Asst. Director of classification, Administration Building) |
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| 4. <input type="checkbox"/> Clemency-Pardon, parole, early out-mandatory supervision (Board of Pardons and Paroles, 8610 Shoal Creek Blvd. Austin, Texas 78757) | 8. <input type="checkbox"/> Personal Interview with a representative of an outside agency (Treatment Division, Administration Building) |

TO: Grievance
(Name and title of official)

DATE:

5/11/22

ADDRESS: Mt View

Get with Medical
Please Get with Medical and Ask them How they
Do A Chart Review when the Inmate isn't
there?

AND
What the Doctors in Galveston Prescribe is Not
followed At ALL So why go all the way
there?

Name: Jo Ann Wilbert

No: 2261580

Unit: Mt View

Living Quarters: A2/28

Work Assignment: ~~DD~~

DISPOSITION: (Inmate will not write in this space)

MEDICALLY UNASSIGNED.

Humphreys Not my Provider2nd Opinion!

On all her medical screw ups.

TEXAS DEPARTMENT OF CRIMINAL JUSTICE

HEALTH SERVICES DIVISION

SICK CALL REQUEST

PART A: (To be completed by offender)

Date:

5/10/22

Offender's Name:

Jo Ann Wilbert

TDCJ No.:

2261580

Work Assignment:

Medically Unassigned

Work Hours:

00

Wing No:

A2/28

School Hours:

00

Service needed:

☐

Medical

☐

Dental

☐

Mental Health

☒

Other:

NP Jennifer Humphreys is

Reason for Health Services Appointment:

NOT MY PROVIDER

Her medical opinion of

Judgment is in question:

my health is grossly in error. Her medical

How long have you had this problem?

Hours:

Days:

Since December 10 2021 when she deleted my restrictions

"In accordance with state law, if this visit meets offender annual health care services fee criteria, I understand that my trust fund account may be charged a \$13.55 health care services fee. I also understand that I will be provided access to health care services regardless of my ability to pay this fee."

Signature of Offender

My
Conditions
are
Permanent +
Chronic

Part B: (To be completed by medical personnel – Do not write below this line)

Medical Reply:

Medical Staff Member's Signature

Date

DEPARTAMENTO DE JUSTICIA CRIMINAL DE TEXAS

DIVISION DE SERVICIOS MEDICOS

PETICION PARA TRATAMIENTO MEDICO

PARTE A: (Completado por ofensor)

Fecha: _____

Nombre de ofensor: _____

Numero de TDCJ.: _____

Trabajo: _____

Horas de trabajo: _____

Ala del edificio: _____ Horas de escuela: _____

Servicios necesarios: ☐ Medico ☐ Dental ☐ Salud Mental ☐ Otro: _____

Razon para tratamiento de servicio de salud: _____

Cuanto tiempo tiene con este problema? Horas: _____ Dias: _____

"De acuerdo con la ley estatal, si esta visita encuentra al delinciente criterios de honorarios de servicios de asistencia médica anuales, entiendo que mi cuenta de fondo fiduciario puede ser cobrada unos honorarios de 13 dólares y 55 centavos. También entiendo que me proporcionarán acceso a servicios de asistencia médica sin tener en cuenta mi capacidad de pagar estos honorarios."

Firma del Ofensor

Parte B: (Completado por personal medico – No escriba debajo de esta linea.)

Respuesta Medica: _____

Firma del Miembro de Empleados Medicos

Fecha

I Am enclosing A Motion to this Court to Allow me to proceed pro se.

I Am reminding this court that if I Do NOT have An ACTIVE COURT CASE (that my LEGAL materials will be "Confiscated" by this Unit! (Mountain View)

My Legal Materials because they are extensive only fit in two yellow chain bags.

I Am going to pay your fees ... And As I have repeatedly notified this Court The Inmate trust fund is A total disaster and after writing them for six months - this is the Junk they sent ME to substantiate how much money is in my trust fund Account. (Not sufficient All All) to Substantiate Your requirement!

I refuse to give up processing my Claim Against The State of Texas, UTMB, and TDCJ. Their Abuses of a 100% Disabled American Veteran continue. Enclosed is an Incident Report You need to know About! It will All be in my next Law Suit.

Jo Ann Wilbert (2261580)

Mt View Unit (A2/28)

2305 Ransom Rd

Gatesville TX 76528

5/12/22

(2)



Jo Ann Wilbert

VS

C
C
C
C
C

Case # _____

STATE OF TEXAS
TEXAS DEPT OF CRIMINAL JUSTICE
UNIV OF TEXAS Medical Branch

MOTION

REQUEST this Court Send ME forms to File A
42 USC 1983 LAW Suit.

Request this Court let me register as A Pro
SE Attorney. Would you please STAMP as Seal this
Document. So it lets officials know I am proceeding.

Jo Ann Wilbert (226 1580)
Mt View Unit (A2/28)
2305 Ransom Road
Gatesville Tx 76528

May 12, 2022

JO ANN WILBERT

CASE # _____

VS

STATE OF TEXAS

TEXAS DEPT OF CRIMINAL JUSTICE

UNIV OF TEXAS MEDICAL BRANCH

PETITION

Petition this Court Contact Mt View Unit (the Law Library) MS LAVYA And allow Inmate Jo Ann Wilbert to keep 2 large yellow chain bags FULL OF LEGAL MATERIAL. They DO NOT Fit in A 1x2 BOX.

This inmate has repeatedly told Officials including TDCJ Executive Director Brian Collier the storage container 1 x 2 box is to small to Accomodate my Legal Work.

Legal Material has repeatedly been attempted to be Confiscated Especially During Lockdown And Cell Searches.

Jo Ann Wilbert (2261580)

Mt View Unit (A2/28)

2305 Ransom Road

Gratesville TX 76528

MAY 12 2022

TEXAS DEPARTMENT OF CRIMINAL JUSTICE — INSTITUTIONAL DIVISION

INMATE REQUEST TO OFFICIAL

REASON FOR REQUEST: (Please check one)

PLEASE ABIDE BY THE FOLLOWING CHANNELS OF COMMUNICATION. THIS WILL SAVE TIME, GET YOUR REQUEST TO THE PROPER PERSON, AND GET AN ANSWER TO YOU MORE QUICKLY.

- | | |
|--|--|
| 1. <input type="checkbox"/> <i>Unit Assignment, Transfer (Chairman of Classification, Administration Building)</i> | 5. <input type="checkbox"/> <i>Visiting List (Asst. Director of classification, Administration Building)</i> |
| 2. <input type="checkbox"/> <i>Restoration of Lost overtime (Unit Warden-if approved, it will be forwarded to the State Disciplinary Committee)</i> | 6. <input type="checkbox"/> <i>Parole requirements and related information (Unit Parole Counselor)</i> |
| 3. <input type="checkbox"/> <i>Request for Promotion in Class or to Trusty Class (Unit Warden- if approved, will be forwarded to the Director of Classification)</i> | 7. <input type="checkbox"/> <i>Inmate Prison Record (Request for copy of record, information on parole eligibility, discharge date, detainers-Unit Administration)</i> |
| 4. <input type="checkbox"/> <i>Clemency-Pardon, parole, early out-mandatory supervision (Board of Pardons and Paroles, 8610 Shoal Creek Blvd. Austin, Texas 78757)</i> | 8. <input type="checkbox"/> <i>Personal Interview with a representative of an outside agency (Treatment Division, Administration Building)</i> |

TO: PA Lundfeld DATE: 5/17/22
(Name and title of official)

ADDRESS: (Mt View Unit)

I need an Appt with you - Not Humphreys.
(You can be my Provider.) She is NOT.

- I need to obtain A Unit Transfer to Carol Young to obtain medical care I am Not getting on this Unit
- I Also need to get All my medical restrictions re installed that Humphreys just Arbitrarily Deleted (12/10/21)
- I Also need to have you look at my medical records for 2/18/22 and process what my "Neurologist" Added to my records

Name: Jo Ann Wilbert No: 2261580 Unit: Mt View

Living Quarters: AZ/28

Work Assignment: ☐☐

~~DISPOSITION:~~ (Inmate will not write in this space)

I have several Appts coming up in July (and medically) will contact My Ortho Hand Surgeon (Dr John Faillace) to Confirm this move.

SICK CALL

MAY 18 AM 12:31

C. Fox
Consulted with T. DORMAN RN

TOI

**DEPARTAMENTO DE JUSTICIA CRIMINAL DE TEXAS
DIVISION DE SERVICIOS MEDICOS
PETICION PARA TRATAMIENTO MEDICO**

PARTE A: (Completado por ofensor)

Fecha: _____

Nombre de ofensor: _____

Numero de TDCJ.: _____

Trabajo: _____

Horas de trabajo: _____

Ala del edificio: _____ Horas de escuela: _____

Servicios necesitados: ☐ Medico ☐ Dental ☐ Salud Mental ☐ Otro: _____

Razon para tratamiento de servicio de salud: _____

Cuanto tiempo tiene con este problema? Horas: _____ Dias: _____

"De acuerdo con la ley estatal, si esta visita encuentra al delincuente criterios de honorarios de servicios de asistencia médica anuales, entiendo que mi cuenta de fondo fiduciario puede ser cobrada unos honorarios de 13 dólares y 55 centavos. También entiendo que me proporcionarán acceso a servicios de asistencia médica sin tener en cuenta mi capacidad de pagar estos honorarios."

Firma del Ofensor

Parte B: (Completado por personal medico – No escriba debajo de esta linea.)

Respuesta Medica: _____

Firma del Miembro de Empleados Medicos
HSA – 9 (Rev. 8/19)

Fecha

Not Humphrey

STAT

TEXAS DEPARTMENT OF CRIMINAL JUSTICE
HEALTH SERVICES DIVISION
SICK CALL REQUEST

PART A: (To be completed by offender)

Offender's Name:

Jo Ann Wilbert

Date:

5/15/22

TDCJ No.:

2261580

Work Assignment:

00

Work Hours:

00

Wing No:

A2/28

School Hours:

Service needed:



Medical



Dental



Mental Health



Other:

Reason for Health Services Appointment:

You have NOT renewed My ZIP Shirt Pass
as requested 3 times now

How long have you had this problem?

Hours:

Days:

(2 DAYS NOW)

Need

A COPY

ASAP.

"In accordance with state law, if this visit meets offender annual health care services fee criteria, I understand that my trust fund account may be charged a \$13.55 health care services fee. I also understand that I will be provided access to health care services regardless of my ability to pay this fee."

Signature of Offender

Jo Ann Wilbert

Part B: (To be completed by medical personnel – Do not write below this line)

Medical Reply:

SICK CALL

Jason Baker LVN

P. Jones, RN

Medical Staff Member's Signature

Date

And you cancelled my Appt with Mr TOGO - it needed to be
Be scheduled ASAP.

No
charge my
Conditions are
Permanent +
Chronic.

JO ANN WILBERT

C 6:22-cv 00220

V

C
C
C

STATE OF TEXAS

UTMB Medical : Dr Lannell Linthicum
Mt View Unit (Cookeville Tx)MOTION

Request this Court (Western District of Texas) Contact
Dr Lannell Linthicum Health Services Director 2 Financial
Plaza Suite 625 Hicksville Tx 71340-3338. Court Order that
Linthicum ~~is~~ her capacity: Director Mt View Unit (UTMB)

Correct and Accurately reflect inmate Jo Ann Wilbert (2061580)
medical health conditions, restrictions, and medical status (work wise)

Further request this Court through this motion have Mt
View Unit update And correct Medical Restrictions List on

Step 2 Grievances enclosed. A copy of Updated Restrictions
and Medical Passes be provided to Wilbert by June 1 2022.

Request this Court order Linthicum and All UTMB documents
and staff Annote Wilbert's work status as Permanently
medically unassigned And that Wilbert be kept in a
NO WORK status Permanently

Through this Motion I need this Court to provide a
"Keep away" on NP Jennifer Humphrey who recklessly endangered
my life when she deleted All my Medical Restrictions and forced
me to work. This constitutes Abuse of an elderly, Abuse
of a Disabled person and violation of 8th Amendment rights
to Adequate medical care

Further Request this Court while ordering to make changes find out.. Why women inmates do not have A Geriatric Unit to live on? Men in TDCJ care have Ellis Unit.

Women have nothing. This is very discriminatory especially for older women inmates needing medical care and treatment.

To Ann Wilbert
Mt View Unit (112/25)
2305 Ransom Rd
Gatesville, TX 76825

May 2022

TEXAS DEPARTMENT OF CRIMINAL JUSTICE INSTITUTIONAL DIVISION

INMATE REQUEST TO OFFICIAL

REASON FOR REQUEST: (Please check one)

PLEASE ABIDE BY THE FOLLOWING CHANNELS OF COMMUNICATION. THIS WILL SAVE TIME, GET YOUR REQUEST TO THE PROPER PERSON, AND GET AN ANSWER TO YOU MORE QUICKLY.

- | | |
|---|---|
| 1. <input type="checkbox"/> Unit Assignment, Transfer (Chairman of Classification, Administration Building) | 5. <input type="checkbox"/> Visiting List (Asst. Director of classification, Administration Building) |
| 2. <input type="checkbox"/> Restoration of Lost overtime (Unit Warden-if approved, it will be forwarded to the State Disciplinary Committee) | 6. <input type="checkbox"/> Parole requirements and related information (Unit Parole Counselor) |
| 3. <input type="checkbox"/> Request for Promotion in Class or to Trusty Class (Unit Warden- if approved, will be forwarded to the Director of Classification) | 7. <input type="checkbox"/> Inmate Prison Record (Request for copy of record, information on parole eligibility, discharge date, detainers-Unit Administration) |
| 4. <input type="checkbox"/> Clemency-Pardon, parole, early out-mandatory supervision (Board of Pardons and Paroles, 8610 Shoal Creek Blvd. Austin, Texas 78757) | 8. <input type="checkbox"/> Personal Interview with a representative of an outside agency (Treatment Division, Administration Building) |

TO:

NP Humphreys

(Name and title of officer)

DATE:

5/13/22

ADDRESS:

Mt View

How can you lie and say my Restrictions are correct
and you did A chart review when #1 you
obviously did not review what Dr Brandi Pipes "put in
my Medical Records FEB 18 2022 when I saw her.
I Am to be medically unassigned. I need my Photophobia
in my record And did you even order my New
Compression glove ??? Where is my cuff Pass.
My family + my Advocate are contacting the governors office
on you. You Are A Disgrace to your profession.

Name: Jo Ann Wilbert Unit: MH View
Living Quarters: A2/28 Unit: 00

DISPOSITION: (Inmate will not write in this space)

SICK CALL

P. Jones, RN

Medically Unassigned.
I DO WORK PERIOD.

MAY 14 AM 12:26

1/1

INMATE REQUEST TO OFFICIAL

REASON FOR REQUEST: (Please check one)

PLEASE ABIDE BY THE FOLLOWING CHANNELS OF COMMUNICATION. THIS WILL SAVE TIME, GET YOUR REQUEST TO THE PROPER PERSON, AND GET AN ANSWER TO YOU MORE QUICKLY.

1. ☐ Unit Assignment, Transfer (Chairman of Classification, Administration Building)
2. ☐ Restoration of Lost overtime (Unit Warden-if approved, it will be forwarded to the State Disciplinary Committee)
3. ☐ Request for Promotion in Class or to Trusty Class (Unit Warden- if approved, will be forwarded to the Director of Classification)
4. ☐ Clemency-Pardon, parole, early out-mandatory supervision (Board of Pardons and Paroles, 8610 Shoal Creek Blvd. Austin, Texas 78757)
5. ☐ Visiting List (Asst. Director of classification, Administration Building)
6. ☐ Parole requirements and related information (Unit Parole Counselor)
7. ☐ Inmate Prison Record (Request for copy of record, information on parole eligibility, discharge date, detainees-Unit Administration)
8. ☐ Personal Interview with a representative of an outside agency (Treatment Division, Administration Building)

MAY 10 2021

TO:

Ombudsman

(Name and title of official)

DATE:

5/4/21

ADDRESS:

Huntsville TX

Non Receipt of Property

My Property which was shipped from Lane Murray Unit on March 16 2021 has not been received on CAROLE YOUNG Unit for over 50 days now. (May 4 2021)
3 Black inmates # 53, # 55 + #61 (in Dorm B) all have received their property in 3 weeks. I have contacted Major Scott the Property Officer (MS Bishop) and Grievance Officer - NO ONE helps locate my Property + get it delivered!

Please look into getting my Property Delivered ASAP

Name: Jo Ann Wilbert

No: 2261580

Unit: ~~Carole Young~~ Med Fac

Living Quarters: B68

Work Assignment: ~~GC~~

DISPOSITION: (Inmate will not write in this space)

TEXAS DEPARTMENT OF CRIMINAL JUSTICE — INSTITUTIONAL DIVISION

INMATE REQUEST TO OFFICIAL

REASON FOR REQUEST: (Please check one)

PLEASE ABIDE BY THE FOLLOWING CHANNELS OF COMMUNICATION. THIS WILL SAVE TIME, GET YOUR REQUEST TO THE PROPER PERSON, AND GET AN ANSWER TO YOU MORE QUICKLY.

- | | |
|---|---|
| 1. <input type="checkbox"/> Unit Assignment, Transfer (Chairman of Classification, Administration Building) | 5. <input type="checkbox"/> Visiting List (Asst. Director of classification, Administration Building) |
| 2. <input type="checkbox"/> Restoration of Lost overtime (Unit Warden-if approved, it will be forwarded to the State Disciplinary Committee) | 6. <input type="checkbox"/> Parole requirements and related information (Unit Parole Counselor) |
| 3. <input type="checkbox"/> Request for Promotion in Class or to Trusty Class (Unit Warden- if approved, will be forwarded to the Director of Classification) | 7. <input type="checkbox"/> Inmate Prison Record (Request for copy of record, information on parole eligibility, discharge date, detainers-Unit Administration) |
| 4. <input type="checkbox"/> Clemency-Pardon, parole, early out-mandatory supervision (Board of Pardons and Paroles, 8610 Shoal Creek Blvd. Austin, Texas 78757) | 8. <input type="checkbox"/> Personal Interview with a representative of an outside agency (Treatment Division, Administration Building) |

TO: Law Library DATE: 5/18/22
(Name and title of official)

ADDRESS: Mt View

(E - 44.2 A) comes out of your Administrative Form
Section of your ^(TDCJ) Directives.

Medical does not carry them — I have to get them
from you to fill out and submit to Medical.
(when I give them the name + location of where I am
obtaining Medical Care and Treatment Outside UTMB/TDCJ)

Name: Jo Ann Wilbert

Living Quarters: A2/28

580

Unit: Mt View Unit

ament: ~~DD~~

DISPOSITION: (Inmate will not write in this space)

Again, this form is not available
on the holdings list

Loyce 05/19/22

TEXAS DEPARTMENT OF CRIMINAL JUSTICE — INSTITUTIONAL DIVISION

INMATE REQUEST TO OFFICIAL

REASON FOR REQUEST: (Please check one)

PLEASE ABIDE BY THE FOLLOWING CHANNELS OF COMMUNICATION. THIS WILL SAVE TIME, GET YOUR REQUEST TO THE PROPER PERSON, AND GET AN ANSWER TO YOU MORE QUICKLY.

- | | |
|--|--|
| 1. <input type="checkbox"/> <i>Unit Assignment, Transfer (Chairman of Classification, Administration Building)</i> | 5. <input type="checkbox"/> <i>Visiting List (Asst. Director of classification, Administration Building)</i> |
| 2. <input type="checkbox"/> <i>Restoration of Lost overtime (Unit Warden-if approved, it will be forwarded to the State Disciplinary Committee)</i> | 6. <input type="checkbox"/> <i>Parole requirements and related information (Unit Parole Counselor)</i> |
| 3. <input type="checkbox"/> <i>Request for Promotion in Class or to Trusty Class (Unit Warden- if approved, will be forwarded to the Director of Classification)</i> | 7. <input type="checkbox"/> <i>Inmate Prison Record (Request for copy of record, information on parole eligibility, discharge date, detainers-Unit Administration)</i> |
| 4. <input type="checkbox"/> <i>Clemency-Pardon, parole, early out-mandatory supervision (Board of Pardons and Paroles, 8610 Shoal Creek Blvd. Austin, Texas 78757)</i> | 8. <input type="checkbox"/> <i>Personal Interview with a representative of an outside agency (Treatment Division, Administration Building)</i> |

TO: GRIEVANCE OFFICER DATE: 5/18/22
(Name and title of official)

ADDRESS: MT View

I submitted A Grievance over A week AGO to find out "WHY" both of my Medical Appointments with MR TOGO were cancelled? You have yet to respond to this Grievance.

We have A New PA MS Lundfeld who can be my Provider. I need to find out why those Appts were cancelled - When TOGO was trying to put me in room to handle my Medical Care. This was denying me Medical Care. I DO NOT have time to wait 30 days.

Name: Jo Ann Wilbert

No: 2261580

Unit: Mt View

Living Quarters: A2/28

Work Assignment: 00

DISPOSITION: (Inmate will not write in this space)



Texas Department of Criminal Justice

STEP 1

OFFENDER
GRIEVANCE FORM

OFFICE USE ONLY

Grievance #: 2022099210 SWDate Received: 5-14-22 SWDate Due: 10-30-22 SWGrievance Code: 1035 SW

Investigator ID #: _____

Extension Date: _____

Date Retd to Offender: _____

Offender Name: Jo Ann Wilbert TDCJ# 2261580Unit: Mt View Housing Assignment: A2/28Unit where incident occurred: Mt View

You must try to resolve your problem with a staff member before you submit a formal complaint. The only exception is when appealing the results of a disciplinary hearing.

Who did you talk to (name, title)? Humphreys/Togo/Medical staff When? 5/12/22What was their response? they did nothing (And I contacted Warden HowardWhat action was taken? Will contact Huntsville/Judge/Greg Abbott MAY 19 2022

State your grievance in the space provided. Please state who, what, when, where and the disciplinary case number if appropriate

The medical on this Unit is Appalling and totally in complent. My ZIP Shirt Pass needed to be renewed before it expired. (5/14/22)

I went to medical and Attempted to see PA Togo on an Appt. When I got to Medical (I found my Appt with him was cancelled (FOR NO Reason) I GRIEVED THIS TO YOU ALSO)

After Requesting 3 times to have my ZIP Shirt Pass renewed - Medical let it expire. This Pass needs to be renewed immediately. (My left Hand is Crushed) and I cannot pull a regular shirt over my Head.

*** These are the SAME IDIOTS (Humphreys) who refused to Renew my CUFF PASS So I CAN travel.

*** Humphreys is FIRED And Not my Medical Provider. She is Insane, Grossly Incompetent & Negligent. (Medical Malpractice) Have also notified Division of Licensing.

MAY 19 2022

MAY 19 2022

Action Requested to resolve your Complaint.

Get me to Medical Immediately And
get my CUFF Pass Renewed.

Offender Signature:

Ann Wilbert

Date:

5/15/22

Grievance Response:

Signature Authority:

Date:

If you are dissatisfied with the Step 1 response, you may submit a Step 2 (I-128) to the Unit Grievance Investigator within 15 days from the date of the Step 1 response. State the reason for appeal on the Step 2 Form.

Returned because: *Resubmit this form when the corrections are made.

- ☐ 1. Grievable time period has expired.
- ☒ 2. Submission in excess of 1 every 7 days. *
- ☐ 3. Originals not submitted. *
- ☐ 4. Inappropriate/Excessive attachments. *
- ☐ 5. No documented attempt at informal resolution. *
- ☐ 6. No requested relief is stated. *
- ☐ 7. Malicious use of vulgar, indecent, or physically threatening language. *
- ☐ 8. The issue presented is not grievable.
- ☐ 9. Redundant, Refer to grievance # _____
- ☐ 10. Illegible/Incomprehensible. *
- ☐ 11. Inappropriate. *

UGI Printed Name/Signature:

S. Weber / [Signature]

Application of the screening criteria for this grievance is not expected to adversely affect the offender's health.

Medical Signature Authority:

I-127 Back (Revised 11-2010)

OFFICE USE ONLY

Initial Submission

UGI Initials:

Grievance #:

Screening Criteria Used:

Date Recd from Offender:

Date Returned to Offender:

2nd Submission

UGI Initials:

Grievance #:

Screening Criteria Used:

Date Recd from Offender:

Date Returned to Offender:

3rd Submission

UGI Initials:

Grievance #:

Screening Criteria Used:

Date Recd from Offender:

Date Returned to Offender:



Texas Department of Criminal Justice

STEP 1 OFFENDER GRIEVANCE FORM

OFFICE USE ONLY

Grievance #: 2022083348
 Date Received: 4-5-22
 Date Due: 5-20-22
 Grievance Code: 6001
 Investigator ID #: J285A
 Extension Date: 7-4-22
 Date Ret'd to Offender: MAY 25 2022

Offender Name: Jo Ann Wilbert TDCJ # 2261580
 Unit: Mt View Housing Assignment: A2/28
 Unit where incident occurred: Mt View

You must try to resolve your problem with a staff member before you submit a formal complaint. The only exception is when appealing the results of a disciplinary hearing.

Who did you talk to (name, title)? MS Jefferson / SGT Sheeksnyder When? 4/4/22

What was their response? Nothing

What action was taken? Will write Grievance and Contact Huntsville

State your grievance in the space provided. Please state who, what, when, where and the disciplinary case number if appropriate

On April 4 2022 at 0645 I was Again called to Medical on NSC (Nurse Sick Call)
 The notice to go on SICK Call was delivered at 11:45 pm on 4/3/22. I DON'T KNOW WHY IT WAS SO LATE IN Being delivered!

I was forced to go to an Overcrowded Day Room At 0700 4/4/22 and was merely having my Blood Pressure + Weight checked - it was the same thing they already did on 3/30/22.

When I told them it has already been done and I need an Appointment with PA (MR Holmes) it was the same thing I told them (3) days prior. The Nurse responded that the only PA here was Humphreys. - BOLD FACE LIE

I have friends and know inmates who see Mr Holmes on this Unit - AND that is who I need to see NOT Humphreys. Humphreys is negligent with my Medical Care and she is argumentative And incompetent I won't see her.

I also will not be TOLD MR Holmes is not here when inmates SEE him everyday on Appointments.

Action Requested to resolve your Complaint.

Get An Appointment with PA Holmes ASAP

PA Holmes only covers at Mt. Vernon on a regular schedule with us and therefore cannot assure you could get scheduled in advance. If you have any further health care concerns, please submit a Sick Call Request.

Date: 4/4/22

Grievance Response:

He was only at the unit for one day in April. He does not have a regular schedule with us and therefore cannot assure you could get scheduled in advance. If you have any further health care concerns, please submit a Sick Call Request.

Signature Authority:

Date: 5/20/2022

If you are dissatisfied with the Step 1 response, you may submit a Step 2 (I-128) to the Unit Grievance Investigator within 15 days from the date of the Step 1 response. State the reason for appeal on the Step 2 Form.

Returned because: *Resubmit this form when the corrections are made.

- ☐ 1. Grievable time period has expired.
- ☐ 2. Submission in excess of 1 every 7 days. *
- ☐ 3. Originals not submitted. *
- ☐ 4. Inappropriate/Excessive attachments. *
- ☐ 5. No documented attempt at informal resolution. *
- ☐ 6. No requested relief is stated. *
- ☐ 7. Malicious use of vulgar, indecent, or physically threatening language. *
- ☐ 8. The issue presented is not grievable.
- ☐ 9. Redundant, Refer to grievance # _____
- ☐ 10. Illegible/Incomprehensible *
- ☐ 11. Inappropriate. *

UGI Printed Name/Signature: _____

Application of the screening criteria for this grievance is not expected to adversely affect the offender's health.

Medical Signature Authority: _____

I-127 Back (Revised 11-2010)

OFFICE USE ONLY

Initial Submission UGI Initials: _____

Grievance #: _____

Screening Criteria Used: _____

Date Recd from Offender: _____

Date Returned to Offender: _____

2nd Submission UGI Initials: _____

Grievance #: _____

Screening Criteria Used: _____

Date Recd from Offender: _____

Date Returned to Offender: _____

3rd Submission UGI Initials: _____

Grievance #: _____

Screening Criteria Used: _____

Date Recd from Offender: _____

Date Returned to Offender: _____



A2-28

STEP 1

OFFENDER
GRIEVANCE FORM

OFFICE USE ONLY

Offender Name: Jo Ann Wilbert TDCJ# 2261580
 Unit: Mt View Housing Assignment: A2/28
 Unit where incident occurred: Mt View

Grievance #: _____
 Date Received: _____
 Date Due: _____
 Grievance Code: _____
 Investigator ID #: _____
 Extension Date: _____
 Date Ret'd to Offender: _____

You must try to resolve your problem with a staff member before you submit a formal complaint. The only exception is when appealing the results of a disciplinary hearing.

Who did you talk to (name, title)? MS Smith

When? 0430/0530/0545
5/27/22

What was their response? She screwed up everything

MAY 31 2022

What action was taken? I contacted my family who will contact Judge

State your grievance in the space provided. Please state who, what, when, where and the disciplinary case number if appropriate

On 5/27/22 (Friday) at 0430 I showed officer Smith my two medical appointments for 0530 and 0630 that same day. I told officer Smith I would NOT go to the 0530 Appointment because NP Humphrey is NOT my Provider - she does not come to work until 0600 and I needed to get my Tissue Issue (lost paper) AND NOT get hung up in court. Smith knew the EXACT SPECIFICS.

I specifically told Smith I WAS going to the 0630 Appointment because I needed to TALK about seeing PA Lundford and take care of other Medical Business.

When I left to get tissue - I came back and asked Smith to go to medical - she said she would call; at 0547 I requested again to go to medical (she said it was to late) I was getting 2 cases - I said that is NOT correct at ALL

I need to go to my 0630 Appt. I requested she call them again and she said NO (This is denying me Medical Care)

The person who talked to Smith on the Radio was the one who threatened me And when I tried to resolve the issue I was threatened + denied my second Appt.

I CAN ONLY GO TO TISSUE ISSUE AT VERY SPECIFIC Times - The 0530 Appt interfered with this.

MAY 31 2022

Medical is typically acting stupid trying to case me up
MS Smith was too busy playing with inmates in the dorm
to handle the situation correctly.

I need this Grievance to be investigated and find out who
the officer was that threatened me.

MAY 31 2022

Action Requested to resolve your Complaint.

If I get 2 cases they should be overturned

I WAS at Tissue Issue And Smith let me go.

Offender Signature:

Jo Ann Wilbert

Date:

5/27/22

Grievance Response:

Signature Authority:

Date:

If you are dissatisfied with the Step 1 response, you may submit a Step 2 (I-128) to the Unit Grievance Investigator within 15 days from the date of the Step 1 response. State the reason for appeal on the Step 2 Form.

Returned because: *Resubmit this form when the corrections are made.

- ☐ 1. Grievable time period has expired.
- ☐ 2. Submission in excess of 1 every 7 days. *
- ☐ 3. Originals not submitted. *
- ☐ 4. Inappropriate/Excessive attachments. *
- ☐ 5. No documented attempt at informal resolution. *
- ☐ 6. No requested relief is stated. *
- ☐ 7. Malicious use of vulgar, indecent, or physically threatening language. *
- ☒ 8. The issue presented is not grievable.
- ☐ 9. Redundant, Refer to grievance # _____
- ☐ 10. Illegible/Incomprehensible. *
- ☐ 11. Inappropriate. *

UGI Printed Name/Signature:

Subber

Application of the screening criteria for this grievance is not expected to adversely affect the offender's health.

Medical Signature Authority:

OFFICE USE ONLY

Initial Submission UGI Initials: SA
Grievance #: 2022104973
Screening Criteria Used: 08 (499)
Date Recd from Offender: 5-8-22
Date Returned to Offender: MAY 31 2022
2nd Submission UGI Initials: _____
Grievance #: _____
Screening Criteria Used: _____
Date Recd from Offender: _____
Date Returned to Offender: _____
3rd Submission UGI Initials: _____
Grievance #: _____
Screening Criteria Used: _____
Date Recd from Offender: _____
Date Returned to Offender: _____

SUBJECT: State briefly the problem on which you desire assistance.

On May 27 2022
 For over 5 days I have been writing to the NAL
 Admin. on the 1st. We are having a problem with
 (and I need some (for pain) -
 (I DO NOT see Humphrey AT ALL FOR ANY REASON) AT 0530.
 Also on 5/27/22 You denied me coming to my 2nd Sick
 Call (Due to cramps on the 1st of this month.)

I need the Name of the person who was on duty at 0530 that
 corrected my 2nd Appt and then I understand me with this
 case? I Am filing a FORMAL COMPLAINT

Name: Jo Ann Miller

No: 2264342

Unit: 11: VHS

Living Quarters: A2/28

Work Assignment: 1/1

DISPOSITION: (Inmate will not write in this space)

INMATE REQUEST TO OFFICIAL

REASON FOR REQUEST: (Please check one)

PLEASE ABIDE BY THE FOLLOWING CHANNELS OF COMMUNICATION. THIS WILL SAVE TIME, GET YOUR REQUEST TO THE PROPER PERSON, AND GET AN ANSWER TO YOU MORE QUICKLY.

- | | |
|--|---|
| <p>1. <input type="checkbox"/> <i>Unit Assignment, Transfer (Chairman of Classification, Administration Building)</i></p> <p>2. <input type="checkbox"/> <i>Restoration of Lost overtime (Unit Warden-if approved, it will be forwarded to the State Disciplinary Committee)</i></p> <p>3. <input type="checkbox"/> <i>Request for Promotion in Class or to Trusty Class (Unit Warden- if approved, will be forwarded to the Director of Classification)</i></p> <p>4. <input type="checkbox"/> <i>Clemency-Pardon, parole, early out-mandatory supervision (Board of Pardons and Paroles, 8610 Shoal Creek Blvd. Austin, Texas 78757)</i></p> | <p>5. <input type="checkbox"/> <i>Visiting List (Asst. Director of classification, Administration Building)</i></p> <p>6. <input type="checkbox"/> <i>Parole requirements and related information (Unit Parole Counselor)</i></p> <p>7. <input type="checkbox"/> <i>Inmate Prison Record (Request for copy of record, information on parole eligibility, discharge date, detainees-Unit Administration)</i></p> <p>8. <input type="checkbox"/> <i>Personal Interview with a representative of an outside agency (Treatment Division, Administration Building)</i></p> |
|--|---|

TO: M. J. [Signature] DATE: 5/24/22
 (Name and title of official)

ADDRESS: 111 View [Signature]

SUBJECT: State briefly the problem on which you desire assistance.

I need Appt with you.
Need an Appt with you — Not Humphrey
I have Court Order Not to be seen by Her.

I need to Get My Restrictions Straight. Need to talk
About my Medical Passes — my CUFF Pass + ZIP Shirt
Pass, She Allowed them to EXPIRE And that is not right
Also need to get non Aspirin — the Dorms are not
carrying it ANY MORE. (And I need some. Also I
will not travel to Galveston VIA plane State. We need to TALK.

Name: Jo Ann Wilbert

No.: 1580

Unit: Mt View

Living Quarters: A2/28

Work Assignment: 00

DISPOSITION: (Inmate will not write in this space)

MAY 26 AM 12:11

SICK CALL

Cox LN
consulted with
T. DORMAN RN

INMATE REQUEST TO OFFICIAL

REASON FOR REQUEST: (Please check one)

PLEASE ABIDE BY THE FOLLOWING CHANNELS OF COMMUNICATION. THIS WILL SAVE TIME, GET YOUR REQUEST TO THE PROPER PERSON, AND GET AN ANSWER TO YOU MORE QUICKLY.

- | | |
|--|---|
| <p>1. <input type="checkbox"/> <i>Unit Assignment, Transfer (Chairman of Classification, Administration Building)</i></p> <p>2. <input type="checkbox"/> <i>Restoration of Lost overtime (Unit Warden-if approved, it will be forwarded to the State Disciplinary Committee)</i></p> <p>3. <input type="checkbox"/> <i>Request for Promotion in Class or to Trusty Class (Unit Warden- if approved, will be forwarded to the Director of Classification)</i></p> <p>4. <input type="checkbox"/> <i>Clemency-Pardon, parole, early out-mandatory supervision (Board of Pardons and Paroles, 8610 Shoal Creek Blvd. Austin, Texas 78757)</i></p> | <p>5. <input type="checkbox"/> <i>Visiting List (Asst. Director of classification, Administration Building)</i></p> <p>6. <input type="checkbox"/> <i>Parole requirements and related information (Unit Parole Counselor)</i></p> <p>7. <input type="checkbox"/> <i>Inmate Prison Record (Request for copy of record, information on parole eligibility, discharge date, detainees-Unit Administration)</i></p> <p>8. <input type="checkbox"/> <i>Personal Interview with a representative of an outside agency (Treatment Division, Administration Building)</i></p> |
|--|---|

TO: PA Lundsford / Medical DATE: 5/24/22
(Name and title of official)

ADDRESS: Mt View

A2-28B

Step 1	X	Grievance #	Inmate Name	TDCJ#	Unit
Step 2		2022088710	Wilbert, Jo Ann	2261580	MV



Texas Department of Criminal Justice
NOTICE OF EXTENSION
Offender Grievance Office

In accordance with the procedures outlined in BP-03.77, "Offender Grievances," and AD-03.82, "Management of Offender Grievances," you are hereby notified that additional time is necessary to complete the investigation of your:

Step 1 Grievance: (check the applicable box)

- ☒ An additional 30 days is needed for appropriate response to your disciplinary appeal.
- ☒ An additional 40 days is needed for appropriate response to your grievance.
- ☐ An additional 45 days is needed for appropriate response to your medical Step 1 grievance.

Step 2 Grievance: (check the applicable box)

- ☐ An additional 30 days is needed for appropriate response to your disciplinary appeal.
- ☐ An additional 40 days is needed for appropriate response to your Step 2 grievance.
- ☐ An additional 45 days is needed for appropriate response to your medical Step 2 grievance.

Shaina Weber UGI II

Name and Title

Date **MAY 25 2022**

Original – Send to the Offender Copy – Attach to the Grievance

Offender Grievance Operations Manual
Appendix M

INMATE REQUEST TO OFFICIAL

REASON FOR REQUEST: (Please check one)

PLEASE ABIDE BY THE FOLLOWING CHANNELS OF COMMUNICATION. THIS WILL SAVE TIME, GET YOUR REQUEST TO THE PROPER PERSON, AND GET AN ANSWER TO YOU MORE QUICKLY.

- | | |
|---|---|
| 1. <input type="checkbox"/> Unit Assignment, Transfer (Chairman of Classification, Administration Building) | 5. <input type="checkbox"/> Visiting List (Asst. Director of classification, Administration Building) |
| 2. <input type="checkbox"/> Restoration of Lost overtime (Unit Warden-if approved, it will be forwarded to the State Disciplinary Committee) | 6. <input type="checkbox"/> Parole requirements and related information (Unit Parole Counselor) |
| 3. <input type="checkbox"/> Request for Promotion in Class or to Trusty Class (Unit Warden- if approved, will be forwarded to the Director of Classification) | 7. <input type="checkbox"/> Inmate Prison Record (Request for copy of record, information on parole eligibility, discharge date, detainees-Unit Administration) |
| 4. <input type="checkbox"/> Clemency-Pardon, parole, early out-mandatory supervision (Board of Pardons and Paroles, 8610 Shoal Creek Blvd. Austin, Texas 78757) | 8. <input type="checkbox"/> Personal Interview with a representative of an outside agency (Treatment Division, Administration Building) |

cc/ MR KUNTZ (Humboldt)
MEDICAL SUPERVISOR (MT VIEW)
CLASSIFICATION

TO: _____

(Name and title of official)

DATE: 5/11/22

ADDRESS: _____

SUBJECT: State briefly the problem on which you desire assistance.

DO NOT NEED

I DO NOT NEED ANY MORE NURSE SICK CALLS
I NEED AN APPT WITH PH (NUMBERED).

THIS IS MY 4TH REQUEST TO SEE NURSE
HUNTRELL IS NOT TO TAKE PART IN ANY OF
MY MEDICATIONS. MY FAMILY IS WAITING TO CALL
MR. HUNTRELL AND
I HAVE GET A COURT ORDER TO DO SO IF
NECESSARY.

Name: JOHN A. HUNT

No: 2001503

Unit: ITC WARD

Living Quarters: 11/10

Work Assignment: shop

DISPOSITION: (Inmate will not write in this space)

initially Unassigned